

106TH CONGRESS  
1ST SESSION

# H. R. 2116

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## AN ACT

To amend title 38, United States Code, to establish a program of extended care services for veterans and to make other improvements in health care programs of the Department of Veterans Affairs.

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## AN ACT

To amend title 38, United States Code, to establish a program of extended care services for veterans and to make other improvements in health care programs of the Department of Veterans Affairs.

1       *Be it enacted by the Senate and House of Representa-*  
2   *tives of the United States of America in Congress assembled,*

1 **SECTION 1. SHORT TITLE; TABLE OF CONTENTS; REF-**  
 2 **ERENCES TO TITLE 38, UNITED STATES CODE.**

3 (a) SHORT TITLE.—This Act may be cited as the  
 4 “Veterans’ Millennium Health Care Act”.

5 (b) TABLE OF CONTENTS.—The table of contents of  
 6 this Act is as follows:

Sec. 1. Short title; table of contents; references to title 38, United States Code.

**TITLE I—ACCESS TO CARE**

Sec. 101. Extended care services.

Sec. 102. Reimbursement for emergency treatment.

Sec. 103. Eligibility for care of combat-injured veterans.

Sec. 104. Access to care for military retirees.

Sec. 105. Benefits for persons disabled by participation in compensated work  
therapy program.

Sec. 106. Pilot program of medical care for certain dependents of enrolled vet-  
erans.

Sec. 107. Enhanced services program at designated medical centers.

Sec. 108. Counseling and treatment for veterans who have experienced sexual  
trauma.

**TITLE II—PROGRAM ADMINISTRATION**

Sec. 201. Medical care collections.

Sec. 202. Health Services Improvement Fund.

Sec. 203. Veterans Tobacco Trust Fund.

Sec. 204. Authority to accept funds for education and training.

Sec. 205. Extension and revision of certain authorities.

Sec. 206. State Home grant program.

Sec. 207. Expansion of enhanced-use lease authority.

Sec. 208. Ineligibility for employment by Veterans Health Administration of  
health care professionals who have lost license to practice in  
one jurisdiction while still licensed in another jurisdiction.

**TITLE III—MISCELLANEOUS**

Sec. 301. Review of proposed changes to operation of medical facilities.

Sec. 302. Patient services at Department facilities.

Sec. 303. Report on assisted living services.

Sec. 304. Chiropractic treatment.

Sec. 305. Designation of hospital bed replacement building at Ioannis A.  
Lougaris Department of Veterans Affairs Medical Center,  
Reno, Nevada.

**TITLE IV—CONSTRUCTION AND FACILITIES MATTERS**

Sec. 401. Authorization of major medical facility projects.

Sec. 402. Authorization of major medical facility leases.

Sec. 403. Authorization of appropriations.

1       (c) REFERENCES TO TITLE 38, UNITED STATES  
 2 CODE.—Except as otherwise expressly provided, whenever  
 3 in this Act an amendment or repeal is expressed in terms  
 4 of an amendment to, or repeal of, a section or other provi-  
 5 sion, the reference shall be considered to be made to a  
 6 section or other provision of title 38, United States Code.

## 7           **TITLE I—ACCESS TO CARE**

### 8   **SEC. 101. EXTENDED CARE SERVICES.**

9       (a) REQUIREMENT TO PROVIDE EXTENDED CARE  
 10 SERVICES.—(1) Chapter 17 is amended by inserting after  
 11 section 1710 the following new section:

#### 12   **“§ 1710A. Extended care services**

13       “(a) The Secretary (subject to section 1710(a)(4) of  
 14 this title and subsection (c) of this section) shall operate  
 15 and maintain a program to provide extended care services  
 16 to eligible veterans in accordance with this section. Such  
 17 services shall include the following:

18           “(1) Geriatric evaluation.

19           “(2) Nursing home care (A) in facilities oper-  
 20 ated by the Secretary, and (B) in community-based  
 21 facilities through contracts under section 1720 of  
 22 this title.

23           “(3) Domiciliary services under section 1710(b)  
 24 of this title.

1           “(4) Adult day health care under section  
2       1720(f) of this title.

3           “(5) Such other noninstitutional alternatives to  
4       nursing home care, including those described in sec-  
5       tion 1720C of this title, as the Secretary considers  
6       reasonable and appropriate.

7           “(6) Respite care under section 1720B of this  
8       title.

9       “(b)(1) In carrying out subsection (a), the Secretary  
10     shall provide extended care services which the Secretary  
11     determines are needed (A) to any veteran in need of such  
12     care for a service-connected disability, and (B) to any vet-  
13     eran who is in need of such care and who has a service-  
14     connected disability rated at 50 percent or more.

15       “(2) The Secretary, in making placements for nurs-  
16     ing home care in Department facilities, shall give highest  
17     priority to veterans (A) who are in need of such care for  
18     a service-connected disability, or (B) who have a service-  
19     connected disability rated at 50 percent or more. The Sec-  
20     retary shall ensure that a veteran described in this sub-  
21     section who continues to need nursing home care shall not  
22     after placement in a Department nursing home be trans-  
23     ferred from the facility without the consent of the veteran,  
24     or, in the event the veteran cannot provide informed con-  
25     sent, the representative of the veteran.

1       “(c)(1) The Secretary, in carrying out subsection (a),  
2 shall prescribe regulations governing the priorities for the  
3 provision of nursing home care in Department facilities  
4 so as to ensure that priority for such care is given (A)  
5 for patient rehabilitation, (B) for clinically complex pa-  
6 tient populations, and (C) for patients for whom there are  
7 not other suitable placement options.

8       “(2) The Secretary may not furnish extended care  
9 services for a non-service-connected disability other than  
10 in the case of a veteran who has a service-connected dis-  
11 ability rated at 50 percent or more unless the veteran  
12 agrees to pay to the United States a copayment for ex-  
13 tended care services of more than 21 days in any year.

14       “(d)(1) A veteran who is furnished extended care  
15 services under this chapter and who is required under sub-  
16 section (c)(2) to pay an amount to the United States in  
17 order to be furnished such services shall be liable to the  
18 United States for that amount.

19       “(2) In implementing subsection (c)(2), the Secretary  
20 shall develop a methodology for establishing the amount  
21 of the copayment for which a veteran described in sub-  
22 section (c) is liable. That methodology shall provide for—

23               “(A) establishing a maximum monthly copay-  
24               ment (based on all income and assets of the veteran  
25               and the spouse of such veteran);

1           “(B) protecting the spouse of a veteran from fi-  
 2           nancial hardship by not counting all of the income  
 3           and assets of the veteran and spouse (in the case of  
 4           a spouse who resides in the community) as available  
 5           for determining the copayment obligation; and

6           “(C) allowing the veteran to retain a monthly  
 7           personal allowance.

8           “(e)(1) There is established in the Treasury of the  
 9           United States a revolving fund known as the Department  
 10          of Veterans Affairs Extended Care Fund (hereinafter in  
 11          this section referred to as the ‘fund’). Amounts in the fund  
 12          shall be available, without fiscal year limitation and with-  
 13          out further appropriation, exclusively for the purpose of  
 14          providing extended care services under subsection (a).

15          “(2) All amounts received by the Department under  
 16          this section shall be deposited in or credited to the fund.”.

17          (2) The table of sections at the beginning of such  
 18          chapter is amended by inserting after the item relating  
 19          to section 1710 the following new item:

          “1710A. Requirement to provide extended care.”.

20          (b) REQUIREMENT TO INCREASE EXTENDED CARE  
 21          SERVICES.—(1) Not later than January 1, 2000, the Sec-  
 22          retary of Veterans Affairs shall develop and begin to im-  
 23          plement a plan for carrying out the recommendation of  
 24          the Federal Advisory Committee on the Future of Long-

1 Term Care to increase, above the level of extended care  
 2 services which were provided as of September 30, 1998—

3 (A) the options and services for home and com-  
 4 munity-based care for eligible veterans; and

5 (B) the percentage of the Department of Vet-  
 6 erans Affairs medical care budget dedicated to such  
 7 care.

8 (2) The Secretary shall ensure that the staffing and  
 9 level of extended care services provided by the Secretary  
 10 nationally in facilities operated by the Secretary during  
 11 any fiscal year is not less than the level of such services  
 12 provided nationally in facilities operated by the Secretary  
 13 during fiscal year 1998.

14 (c) ADULT DAY HEALTH CARE.—Section  
 15 1720(f)(1)(A) is amended to read as follows:

16 “(f)(1)(A) The Secretary may furnish adult day  
 17 health care services to a veteran enrolled under section  
 18 1705(a) of this title who would otherwise require nursing  
 19 home care.”

20 (d) RESPITE CARE PROGRAM.—Section 1720B is  
 21 amended—

22 (1) in subsection (a), by striking “eligible” and  
 23 inserting “enrolled”;

24 (2) in subsection (b)—

1 (A) by striking “the term ‘respite care’  
2 means hospital or nursing home care” and in-  
3 serting “the term ‘respite care services’ means  
4 care and services”;

5 (B) by striking “is” at the beginning of  
6 each of paragraphs (1), (2), and (3) and insert-  
7 ing “are”; and

8 (C) by striking “in a Department facility”  
9 in paragraph (2); and

10 (3) by adding at the end the following new sub-  
11 section:

12 “(c) In furnishing respite care services, the Secretary  
13 may enter into contract arrangements.”.

14 (e) CONFORMING AMENDMENTS.—Section 1710 is  
15 amended—

16 (1) in subsection (a)(1), by striking “may fur-  
17 nish nursing home care,”; and

18 (2) in subsection (a)(4), by inserting “, and the  
19 requirement in section 1710A of this title that the  
20 Secretary provide a program of extended care serv-  
21 ices,” after “medical services”.

22 (f) STATE HOMES.—Section 1741(a)(2) is amended  
23 by striking “adult day health care in a State home” and  
24 inserting “extended care services described in any of para-

1 graphs (4) through (6) of section 1710A(a) of this title  
 2 under a program administered by a State home”.

3 (g) EFFECTIVE DATE.—(1) Except as provided in  
 4 paragraph (2), the amendments made by this section shall  
 5 take effect on the date of the enactment of this Act.

6 (2) Subsection (c)(2) of section 1710A(a) of title 38,  
 7 United States Code (as added by subsection (a)), shall  
 8 take effect on the effective date of regulations prescribed  
 9 by the Secretary of Veterans Affairs under subsections  
 10 (c)(2) and (d) of such section. The Secretary shall publish  
 11 the effective date of such regulations in the Federal Reg-  
 12 ister.

13 (3) The provisions of section 1710(f) of title 38,  
 14 United States Code, shall not apply to any day of nursing  
 15 home care on or after the effective date of regulations  
 16 under paragraph (2).

17 **SEC. 102. REIMBURSEMENT FOR EMERGENCY TREATMENT.**

18 (a) AUTHORITY TO PROVIDE REIMBURSEMENT.—  
 19 Chapter 17 is amended by inserting after section 1724 the  
 20 following new section:

21 **“§ 1725. Reimbursement for emergency treatment**

22 “(a) GENERAL AUTHORITY.—(1) Subject to sub-  
 23 sections (c) and (d), the Secretary may reimburse a vet-  
 24 eran described in subsection (b) for the reasonable value

1 of emergency treatment furnished the veteran in a non-  
2 Department facility.

3 “(2) In any case in which reimbursement is author-  
4 ized under subsection (a)(1), the Secretary, in the Sec-  
5 retary’s discretion, may, in lieu of reimbursing the vet-  
6 eran, make payment of the reasonable value of the fur-  
7 nished emergency treatment directly—

8 “(A) to a hospital or other health care provider  
9 that furnished the treatment; or

10 “(B) to the person or organization that paid for  
11 such treatment on behalf of such veteran.

12 “(b) ELIGIBILITY.—(1) A veteran referred to in sub-  
13 section (a)(1) is an individual who is an active Department  
14 health-care participant who is personally liable for emer-  
15 gency treatment furnished the veteran in a non-Depart-  
16 ment facility.

17 “(2) A veteran is an active Department health-care  
18 participant if the veteran—

19 “(A) is described in any of paragraphs (1)  
20 through (6) of section 1705(a) of this title;

21 “(B) is enrolled in the health care system estab-  
22 lished under such section; and

23 “(C) received care under this chapter within the  
24 12-month period preceding the furnishing of such  
25 emergency treatment.

1       “(3) A veteran is personally liable for emergency  
2 treatment furnished the veteran in a non-Department fa-  
3 cility if the veteran—

4               “(A) is financially liable to the provider of  
5 emergency treatment for that treatment;

6               “(B) has no entitlement to care or services  
7 under a health-plan contract;

8               “(C) has no other contractual or legal recourse  
9 against a third party that would, in whole or in part,  
10 extinguish such liability to the provider; and

11               “(D) is not eligible for reimbursement for med-  
12 ical care or services under section 1728 of this title.

13       “(c) LIMITATIONS ON REIMBURSEMENT.—(1) The  
14 Secretary, in accordance with regulations prescribed by  
15 the Secretary, shall—

16               “(A) establish the maximum amount payable  
17 under subsection (a);

18               “(B) delineate the circumstances under which  
19 such payments may be made, to include such re-  
20 quirements on requesting reimbursement as the Sec-  
21 retary shall establish; and

22               “(C) provide that in no event may a payment  
23 under that subsection include any amount for which  
24 the veteran is not personally liable.

1       “(2) Subject to paragraph (1), the Secretary may  
2 provide reimbursement under this section only after the  
3 veteran or the provider of emergency treatment has ex-  
4 hausted without success all claims and remedies reason-  
5 ably available to the veteran or provider against a third  
6 party for payment of such treatment.

7       “(3) Payment by the Secretary under this section, on  
8 behalf of a veteran described in subsection (b), to a pro-  
9 vider of emergency treatment, shall, unless rejected and  
10 refunded by the provider within 30 days of receipt, extin-  
11 guish any liability on the part of the veteran for that treat-  
12 ment. Neither the absence of a contract or agreement be-  
13 tween the Secretary and the provider nor any provision  
14 of a contract, agreement, or assignment to the contrary  
15 shall operate to modify, limit, or negate the requirement  
16 in the preceding sentence.

17       “(d) INDEPENDENT RIGHT OF RECOVERY.—(1) In  
18 accordance with regulations prescribed by the Secretary,  
19 the United States shall have the independent right to re-  
20 cover any amount paid under this section when, and to  
21 the extent that, a third party subsequently makes a pay-  
22 ment for the same emergency treatment.

23       “(2) Any amount paid by the United States to the  
24 veteran (or the veteran’s personal representative, suc-  
25 cessor, dependents, or survivors) or to any other person

1 or organization paying for such treatment shall constitute  
2 a lien in favor of the United States against any recovery  
3 the payee subsequently receives from a third party for the  
4 same treatment.

5 “(3) Any amount paid by the United States to the  
6 provider that furnished the veteran’s emergency treatment  
7 shall constitute a lien against any subsequent amount the  
8 provider receives from a third party for the same emer-  
9 gency treatment for which the United States made pay-  
10 ment.

11 “(4) The veteran (or the veteran’s personal rep-  
12 resentative, successor, dependents, or survivors) shall en-  
13 sure that the Secretary is promptly notified of any pay-  
14 ment received from any third party for emergency treat-  
15 ment furnished to the veteran. The veteran (or the vet-  
16 eran’s personal representative, successor, dependents, or  
17 survivors) shall immediately forward all documents relat-  
18 ing to such payment, cooperate with the Secretary in the  
19 investigation of such payment, and assist the Secretary  
20 in enforcing the United States right to recover any pay-  
21 ment made under subsection (c)(3).

22 “(e) WAIVER.—The Secretary, in the Secretary’s dis-  
23 cretion, may waive recovery of a payment made to a vet-  
24 eran under this section that is otherwise required by sub-  
25 section (d)(1) when the Secretary determines that such

1 waiver would be in the best interest of the United States,  
2 as defined by regulations prescribed by the Secretary.

3 “(f) DEFINITIONS.—For purposes of this section:

4 “(1) The term ‘emergency treatment’ means  
5 medical care or services furnished, in the judgment  
6 of the Secretary—

7 “(A) when Department or other Federal  
8 facilities are not feasibly available and an at-  
9 tempt to use them beforehand would not be rea-  
10 sonable;

11 “(B) when such care or services are ren-  
12 dered in a medical emergency of such nature  
13 that delay would be hazardous to life or health;  
14 and

15 “(C) until such time as the veteran can be  
16 transferred safely to a Department facility or  
17 other Federal facility.

18 “(2) The term ‘health-plan contract’ includes  
19 any of the following:

20 “(A) An insurance policy or contract, med-  
21 ical or hospital service agreement, membership  
22 or subscription contract, or similar arrangement  
23 under which health services for individuals are  
24 provided or the expenses of such services are  
25 paid.

1           “(B) An insurance program described in  
2           section 1811 of the Social Security Act (42  
3           U.S.C. 1395c) or established by section 1831 of  
4           such Act (42 U.S.C. 1395j).

5           “(C) A State plan for medical assistance  
6           approved under title XIX of such Act (42  
7           U.S.C. 1396 et seq.).

8           “(D) A workers’ compensation law or plan  
9           described in section 1729(a)(2)(A) of this title.

10           “(E) A law of a State or political subdivi-  
11           sion described in section 1729(a)(2)(B) of this  
12           title.

13           “(3) The term ‘third party’ means any of the  
14           following:

15           “(A) A Federal entity.

16           “(B) A State or political subdivision of a  
17           State.

18           “(C) An employer or an employer’s insur-  
19           ance carrier.

20           “(D) An automobile accident reparations  
21           insurance carrier.

22           “(E) A person or entity obligated to pro-  
23           vide, or to pay the expenses of, health services  
24           under a health-plan contract.”.

1 (b) CONFORMING AMENDMENTS.—(1) Section  
2 1729A(b) is amended—

3 (A) by redesignating paragraph (6) as para-  
4 graph (7); and

5 (B) by inserting after paragraph (5) the fol-  
6 lowing new paragraph:

7 “(6) Section 1725 of this title.”.

8 (2) The table of sections at the beginning of chapter  
9 17 is amended by inserting after the item relating to sec-  
10 tion 1724 the following new item:

“1725. Reimbursement for emergency treatment.”.

11 (c) EFFECTIVE DATE.—The amendments made by  
12 this section shall take effect 180 days after the date of  
13 the enactment of this Act.

14 (d) IMPLEMENTATION REPORTS.—The Secretary of  
15 Veterans Affairs shall include with the budget justification  
16 materials submitted to Congress in support of the Depart-  
17 ment of Veterans Affairs budget for fiscal year 2002 and  
18 for fiscal year 2003 a report on the implementation of sec-  
19 tion 1725 of title 38, United States Code, as added by  
20 subsection (a). Each such report shall include information  
21 on the experience of the Department under that section  
22 and the costs incurred, and expected to be incurred, under  
23 that section.

1 **SEC. 103. ELIGIBILITY FOR CARE OF COMBAT-INJURED**  
2 **VETERANS.**

3 (a) PRIORITY OF CARE.—Chapter 17 is amended —

4 (1) in section 1710(a)(2)(D), by inserting “or  
5 who was injured in combat” after “former prisoner  
6 of war”; and

7 (2) in section 1705(a)(3), by inserting “or who  
8 were injured in combat” after “former prisoners of  
9 war”.

10 (b) DEFINITION OF INJURED IN COMBAT.—Section  
11 1701 is amended by adding at the end the following new  
12 paragraph:

13 “(10) The term ‘injured in combat’ means  
14 wounded in action as the result of an act of an  
15 enemy of the United States or otherwise wounded in  
16 action by weapon fire while directly engaged in  
17 armed conflict (other than as the result of willful  
18 misconduct by the wounded individual).”.

19 **SEC. 104. ACCESS TO CARE FOR MILITARY RETIREES.**

20 (a) IMPROVED ACCESS.—(1) Section 1710(a)(2) is  
21 amended—

22 (A) by striking “or” at the end of subpara-  
23 graph (F);

24 (B) by striking the period at the end of sub-  
25 paragraph (G) and inserting “; or”; and

1 (C) by adding at the end the following new sub-  
2 paragraph:

3 “(H) who has retired from active military,  
4 naval, or air service in the Army, Navy, Air Force,  
5 or Marine Corps, is eligible for care under the  
6 TRICARE program established by the Secretary of  
7 Defense, and is not otherwise described in paragraph  
8 (1) or in this paragraph.”.

9 (2) Section 1705(a) is amended—

10 (A) by redesignating paragraph (7) as para-  
11 graph (8);

12 (B) by inserting after paragraph (6) the fol-  
13 lowing new paragraph (7):

14 “(7) Veterans who are eligible for hospital care,  
15 medical services, and nursing home care under sec-  
16 tion 1710(a)(2)(H) of this title.”; and

17 (C) in paragraph (6), by inserting “(other than  
18 subparagraph (H) of such section)” before the pe-  
19 riod at the end.

20 (b) INTERAGENCY AGREEMENT.—(1) The Secretary  
21 of Defense shall enter into an agreement (characterized  
22 as a memorandum of understanding or otherwise) with the  
23 Secretary of Veterans Affairs with respect to the provision  
24 of medical care by the Secretary of Veterans Affairs to  
25 eligible military retirees in accordance with the amend-

1 ments made by subsection (a). That agreement shall in-  
2 clude provisions for reimbursement of the Secretary of  
3 Veterans Affairs by the Secretary of Defense for medical  
4 care provided by the Secretary of Veterans Affairs to an  
5 eligible military retiree and may include such other provi-  
6 sions with respect to the terms and conditions of such care  
7 as may be agreed upon by the two Secretaries.

8       (2) Reimbursement under that agreement shall be in  
9 accordance with rates agreed upon by the Secretary of De-  
10 fense and the Secretary of Veterans Affairs. Such reim-  
11 bursement may be made by the Secretary of Defense or  
12 by the appropriate TRICARE Managed Care Support con-  
13 tractor, as determined in accordance with that agreement.

14       (3) In entering into the agreement under paragraph  
15 (1), particularly with respect to determination of the rates  
16 of reimbursement under paragraph (2), the Secretary of  
17 Defense shall consult with TRICARE Managed Care Sup-  
18 port contractors.

19       (4) The Secretary of Veterans Affairs may not enter  
20 into an agreement under paragraph (1) for the provision  
21 of care in accordance with the amendments made by sub-  
22 section (a) with respect to any geographic service area,  
23 or a part of any such area, of the Veterans Health Admin-  
24 istration unless—

1           (A) in the judgment of that Secretary, the De-  
2           partment of Veterans Affairs will recover the costs  
3           of providing such care to eligible military retirees;  
4           and

5           (B) that Secretary has certified and docu-  
6           mented, with respect to any geographic service area  
7           in which the Secretary proposes to provide care in  
8           accordance with the amendments made by sub-  
9           section (a), that such geographic service area, or  
10          designated part of any such area, has adequate ca-  
11          pacity (consistent with the requirements in section  
12          1705(b)(1) of title 38, United States Code, that care  
13          to enrollees shall be timely and acceptable in quality)  
14          to provide such care.

15          (5) The agreement under paragraph (1) shall be en-  
16          tered into by the Secretaries not later than nine months  
17          after the date of the enactment of this Act. If the Secre-  
18          taries are unable to reach agreement, they shall jointly re-  
19          port, by that date or within 30 days thereafter, to the  
20          Committees on Armed Services and the Committees on  
21          Veterans' Affairs of the Senate and House of Representa-  
22          tives on the reasons for their inability to reach an agree-  
23          ment and their mutually agreed plan for removing any im-  
24          pediments to final agreement.

1       (c) DEPOSITING OF REIMBURSEMENTS.—Amounts  
2 received by the Secretary of Veterans Affairs under the  
3 agreement under subsection (b) shall be deposited in the  
4 Department of Veterans Affairs Health Services Improve-  
5 ment Fund established under section 1729B of title 38,  
6 United States Code, as added by section 202.

7       (d) PHASED IMPLEMENTATION.—(1) The Secretary  
8 of Defense shall include in each TRICARE contract en-  
9 tered into after the date of the enactment of this Act pro-  
10 visions to implement the agreement under subsection (b).

11       (2) The amendments made by subsection (a) and the  
12 provisions of the agreement under subsection (b)(2) shall  
13 apply to the furnishing of medical care by the Secretary  
14 of Veterans Affairs in any area of the United States only  
15 if that area is covered by a TRICARE contract that was  
16 entered into after the date of the enactment of this Act.

17       (e) ELIGIBLE MILITARY RETIREES.—For purposes  
18 of subsection (b), an eligible military retiree is a member  
19 of the Army, Navy, Air Force, or Marine Corps who—

20               (1) has retired from active military, naval, or  
21       air service;

22               (2) is eligible for care under the TRICARE pro-  
23       gram established by the Secretary of Defense;

24               (3) has enrolled for care under section 1705 of  
25       title 38, United States Code; and

1 (4) is not described in paragraph (1) or (2) of  
2 section 1710(a) of such title (other than subpara-  
3 graph (H) of such paragraph (2)), as amended by  
4 subsection (a).

5 **SEC. 105. BENEFITS FOR PERSONS DISABLED BY PARTICI-**  
6 **PATION IN COMPENSATED WORK THERAPY**  
7 **PROGRAM.**

8 Section 1151(a)(2) is amended—

9 (1) by inserting “(A)” after “proximately  
10 caused”; and

11 (2) by inserting before the period at the end the  
12 following: “, or (B) by participation in a program  
13 (known as a ‘compensated work therapy program’)  
14 under section 1718 of this title”.

15 **SEC. 106. PILOT PROGRAM OF MEDICAL CARE FOR CER-**  
16 **TAIN DEPENDENTS OF ENROLLED VET-**  
17 **ERANS.**

18 (a) IN GENERAL.—(1) Chapter 17 is amended by in-  
19 serting after section 1713 the following new section:

20 **“§ 1713A. Medical care for certain dependents of en-**  
21 **rolled veterans: pilot program**

22 “(a) The Secretary may, during the program period,  
23 carry out a pilot program to provide primary health care  
24 services for eligible dependents of veterans in accordance  
25 with this section.

1 “(b) For purposes of this section:

2 “(1) The term ‘program period’ means the pe-  
3 riod beginning on the first day of the first month be-  
4 ginning more than 180 days after the date of the en-  
5 actment of this section and ending three years after  
6 that day.

7 “(2) The term ‘eligible dependent’ means an in-  
8 dividual who—

9 “(A) is the spouse or child of a veteran  
10 who is enrolled in the system of patient enroll-  
11 ment established by the Secretary under section  
12 1705 of this title; and

13 “(B) is determined by the Secretary to  
14 have the ability to pay for such care or services  
15 either directly or through reimbursement or in-  
16 demnification from a third party.

17 “(c) The Secretary may furnish health care services  
18 to an eligible dependent under this section only if the de-  
19 pendent (or, in the case of a minor, the parent or guardian  
20 of the dependent) agrees—

21 “(1) to pay to the United States an amount  
22 representing the reasonable charges for the care or  
23 services furnished (as determined by the Secretary);  
24 and

1           “(2) to cooperate with and provide the Sec-  
2       retary an appropriate assignment of benefits, au-  
3       thorization to release medical records, and any other  
4       executed documents, information, or evidence rea-  
5       sonably needed by the Secretary to recover the De-  
6       partment’s charges for the care or services furnished  
7       by the Secretary.

8       “(d)(1) The health care services provided under the  
9       pilot program under this section may consist of such pri-  
10      mary hospital care services and such primary medical  
11      services as may be authorized by the Secretary. The Sec-  
12      retary may furnish those services directly through a De-  
13      partment medical facility or, subject to paragraphs (2)  
14      and (3), pursuant to a contract or other agreement with  
15      a non-Department facility (including a health-care pro-  
16      vider, as defined in section 8152(2) of this title).

17      “(2) The Secretary may enter into a contract or  
18      agreement to furnish primary health care services under  
19      this section in a non-Department facility on the same basis  
20      as provided under subsections (a) and (b) of section 1703  
21      of this title or may include such care in an existing or  
22      new agreement under section 8153 of this title when the  
23      Secretary determines it to be in the best interest of the  
24      prevailing standards of the Department medical care pro-  
25      gram.

1       “(3) Primary health care services may not be author-  
2 ized to be furnished under this section at any medical fa-  
3 cility if the furnishing of those services would result in  
4 the denial of, or a delay in providing, access to care for  
5 any enrolled veteran at that facility.

6       “(e)(1) In the case of an eligible dependent who is  
7 furnished primary health care services under this section  
8 and who has coverage under a health-plan contract, as de-  
9 fined in section 1729(i)(1) of this title, the United States  
10 shall have the right to recover or collect the reasonable  
11 charges for such care or services from such health-plan  
12 contract to the extent that the individual or the provider  
13 of the care or services would be eligible to receive payment  
14 for such care or services from such health-plan contract  
15 if the care or services had not been furnished by a depart-  
16 ment or agency of the United States.

17       “(2) The right of the United States to recover under  
18 paragraph (1) shall be enforceable with respect to an eligi-  
19 ble dependent in the same manner as applies under sub-  
20 sections (a)(3), (b), (c)(1), (c)(2), (d), (f), (h), and (i) of  
21 section 1729 of this title with respect to a veteran.

22       “(f)(1) Subject to paragraphs (2) and (3), the pilot  
23 program under this section shall be carried out during the  
24 program period in not more than four veterans integrated  
25 service networks, as designated by the Secretary. In desig-

1 nating networks under the preceding sentence, the Sec-  
2 retary shall favor designation of networks that are suited  
3 to serve dependents of veterans because of—

4 “(A) the capability of one or more medical fa-  
5 cilities within the network to furnish primary health  
6 care services to eligible dependents while assuring  
7 that veterans continue to receive priority for care  
8 and services;

9 “(B) the demonstrated success of such medical  
10 facilities in billings and collections;

11 “(C) support for initiating such a pilot program  
12 among veterans in the network; and

13 “(D) such other criteria as the Secretary con-  
14 siders appropriate.

15 “(2) In implementing the pilot program, the Sec-  
16 retary may not provide health care services for dependents  
17 who are children—

18 “(A) in more than one of the participating net-  
19 works during the first year of the program period;  
20 and

21 “(B) in more than two of the participating net-  
22 works during the second year of the program period.

23 “(3) In implementing the pilot program, the Sec-  
24 retary shall give priority to facilities which operate women  
25 veterans’ clinics.”.

1       (2) The table of sections at the beginning of such  
2 chapter is amended by inserting after the item relating  
3 to section 1713 the following new item:

“1713A. Medical care for certain dependents and enrolled veterans: pilot program.”.

4       (b) GAO REVIEW AND RECOMMENDATIONS.—(1) Beginning six months after the commencement of the pilot  
5 program, the Comptroller General, in consultation with  
6 the Under Secretary for Health of the Department of Veterans Affairs, shall monitor the conduct of the pilot program.  
9

10       (2) Not later than 14 months after the commencement of the pilot program, the Comptroller General shall  
11 submit to the Secretary of Veterans Affairs a report setting forth the Comptroller General’s findings and recommendations with respect to the first 12 months of operation of the pilot program.  
15

16       (3)(A) The report under paragraph (2) shall include  
17 the findings of the Comptroller General regarding—

18               (i) whether the collection of reasonable charges  
19 for the care or services provided reasonably covers  
20 the costs of providing such care and services; and

21               (ii) whether the Secretary, in carrying out the  
22 program, is in compliance with the limitation in subsection (d)(3) of section 1713A of title 38, United  
23 States Code, as added by subsection (a).  
24

1 (B) The report shall include the recommendations of  
2 the Comptroller General regarding any remedial steps that  
3 the Secretary should take in the conduct of the program  
4 or in the billing and collection of charges under the pro-  
5 gram.

6 (4) The Secretary, in consultation with, and following  
7 receipt of the report of, the Comptroller General, shall  
8 take such steps as may be needed to ensure that any rec-  
9 ommendations of the Comptroller General in the report  
10 under paragraph (2) with respect to billings and collec-  
11 tions, and with respect to compliance with the limitation  
12 in subsection (d)(3) of such section, are carried out.

13 (5) For purposes of this subsection, the term “com-  
14 mencement of the pilot program” means the date on which  
15 the Secretary of Veterans Affairs begins to furnish serv-  
16 ices to eligible dependents under the pilot program under  
17 section 1713A of title 38, United States Code, as added  
18 by subsection (a).

19 **SEC. 107. ENHANCED SERVICES PROGRAM AT DESIGNATED**  
20 **MEDICAL CENTERS.**

21 (a) FINDINGS.—Congress makes the following find-  
22 ings:

23 (1) Historically, health care facilities under the  
24 jurisdiction of the Department of Veterans Affairs

1 have not consistently been located in proximity to  
2 veteran population concentrations.

3 (2) Hospital occupancy rates at numbers of De-  
4 partment medical centers are at levels substantially  
5 below a level needed for efficient operation and opti-  
6 mal quality of care.

7 (3) The costs of maintaining highly inefficient  
8 medical centers, which were designed and con-  
9 structed decades ago to standards no longer consid-  
10 ered acceptable, substantially diminish the avail-  
11 ability of resources which could be devoted to the  
12 provision of needed direct care services.

13 (4) Freeing resources currently devoted to high-  
14 ly inefficient provision of hospital care could,  
15 through contracting for acute hospital care and es-  
16 tablishing new facilities for provision of outpatient  
17 care, yield improved access and service to veterans.

18 (b) ENHANCED SERVICES PROGRAM AT DESIGNATED  
19 MEDICAL CENTERS.—The Secretary of Veterans Affairs,  
20 in carrying out the responsibilities of the Secretary to fur-  
21 nish hospital care and medical services through network-  
22 based planning, shall establish an enhanced service pro-  
23 gram at Department medical centers (hereinafter in this  
24 section referred to as “designated centers”) that are des-  
25 ignated by the Secretary for the purposes of this section.

1 Medical centers shall be designated to improve access, and  
2 quality of service provided, to veterans served by those  
3 medical centers. The Secretary may designate a medical  
4 center for the program only if the Secretary determines,  
5 on the basis of a market and data analysis (which shall  
6 include a study of the cost-effectiveness of the care pro-  
7 vided at such center), that the medical center—

8           (1) can, in whole or in part, no longer be oper-  
9           ated in a manner that provides hospital or other  
10          care efficiently and at optimal quality because of  
11          such factors as—

12                   (A) the current and projected need for hos-  
13                   pital or other care capacity at such center;

14                   (B) the extent to which the facility is func-  
15                   tionally obsolete; and

16                   (C) the cost of operation and maintenance  
17                   of the physical plant; and

18           (2) is located in proximity (A) to one or more  
19          community hospitals which have the capacity to pro-  
20          vide primary and secondary hospital care of appro-  
21          priate quality to veterans under contract arrange-  
22          ments with the Secretary which the Secretary deter-  
23          mines are advantageous to the Department, or (B)  
24          to another Department medical center which is capa-

1       ble of absorbing some or all of the patient workload  
2       of such medical center.

3       (c) MEDICAL CENTER PLAN.—The Secretary shall,  
4 with respect to each designated center, develop a plan  
5 aimed at improving the accessibility and quality of service  
6 provided to veterans. Each plan shall be developed in ac-  
7 cordance with the requirements for strategic network-  
8 based planning described in section 8107 of title 38,  
9 United States Code. In the plan for a designated center,  
10 the Secretary shall describe a program which, if imple-  
11 mented, would allow the Secretary to do any of the fol-  
12 lowing:

13           (1) Provide for a Department facility described  
14 in subsection (b)(2)(B) to absorb some or all of the  
15 patient workload of the designated center.

16           (2) Contract, under such arrangements as the  
17 Secretary determines appropriate, for needed pri-  
18 mary and secondary hospital care for veterans—

19                   (A) who reside in the catchment area of  
20 each designated center;

21                   (B) who are described in paragraphs (1)  
22 through (6) of section 1705(a) of title 38,  
23 United States Code; and

1 (C) whom the Secretary has enrolled for  
2 care pursuant to section 1705 of title 38,  
3 United States Code.

4 (3) Cease to provide hospital care, or hospital  
5 care and other medical services, at such center.

6 (4) If practicable, lease, under subchapter V of  
7 chapter 81 of title 38, United States Code, land and  
8 improvements which had been dedicated to providing  
9 care described in paragraph (3).

10 (5) Establish, through reallocation of oper-  
11 ational funds and through appropriate lease arrange-  
12 ments or renovations, facilities for—

13 (A) delivery of outpatient care; and

14 (B) services which would obviate a need for  
15 nursing home care or other long-term institu-  
16 tional care.

17 (d) EMPLOYEE PROTECTIONS.—(1) In entering into  
18 any contract or lease under subsection (c), the Secretary  
19 shall attempt to ensure that employees of the Secretary  
20 who would be displaced under this section be given priority  
21 in hiring by such contractor, lessee, or other entity.

22 (2) In carrying out subsection (c)(5), the Secretary  
23 shall give preference to providing services through em-  
24 ployee-based delivery models.

1       (e) REQUIRED CONSULTATION.—In developing a  
2 plan under subsection (c), the Secretary shall obtain the  
3 views of veterans organizations, exclusive employee rep-  
4 resentatives, and other interested parties and provide for  
5 such organizations and parties to participate in the devel-  
6 opment of the plan.

7       (f) SUBMISSION OF PLAN TO CONGRESS.—The Sec-  
8 retary may not implement a plan described in subsection  
9 (c) with respect to a medical center unless the Secretary  
10 has first submitted a report containing a detailed plan and  
11 justification to the appropriate committees of Congress.  
12 No action to carry out such plan may be taken after the  
13 submission of such report until the end of a 45-day period  
14 following the date of the submission of the report, not less  
15 than 30 days of which shall be days during which Con-  
16 gress shall have been in continuous session. For purposes  
17 of the preceding sentence, continuity of a session of Con-  
18 gress is broken only by adjournment sine die, and there  
19 shall be excluded from the computation of any period of  
20 continuity of session any day during which either House  
21 of Congress is not in session during an adjournment of  
22 more than three days to a day certain.

23       (g) IMPLEMENTATION OF PLAN.—In carrying out the  
24 plan described in subsection (c), or a modification to that

1 plan following the submission of such plan to the appro-  
2 priate committees of Congress, the Secretary—

3 (1) may, without regard to any limitation under  
4 section 1703 of title 38, United States Code, con-  
5 tract for hospital care for veterans who are—

6 (A) described in paragraphs (1) through  
7 (6) of section 1705(a) of title 38, United States  
8 Code; and

9 (B) enrolled under subsection (a) of such  
10 section 1705;

11 (2) may enter into any contract under section  
12 8153 of title 38, United States Code;

13 (3) shall, in exercising the authority of the Sec-  
14 retary under this section to contract for hospital  
15 care, provide for ongoing oversight and management,  
16 by employees of the Department, of the hospital care  
17 furnished such veterans; and

18 (4) shall, in the case of a designated center  
19 which ceases to provide services under the  
20 program—

21 (A) ensure a reallocation of funds as pro-  
22 vided in subsection (h); and

23 (B) provide reemployment assistance to  
24 employees.

1       (h) FUNDS ALLOCATION.—In carrying out subsection  
2 (g)(4), the Secretary shall ensure that not less than 90  
3 percent of the funds that would have been made available  
4 to a designated center to support the provision of services,  
5 but for such mission change, shall be made available to  
6 the appropriate health care region of the Veterans Health  
7 Administration to ensure that the implementation of the  
8 plan under subsection (g) will result in demonstrable im-  
9 provement in the accessibility, and quality of service pro-  
10 vided, to veterans in the catchment area of such center.

11       (i) SPECIALIZED SERVICES.—The provisions of this  
12 section do not diminish the obligations of the Secretary  
13 under section 1706(b) of title 38, United States Code.

14       (j) REPORT.—Not later than 12 months after imple-  
15 mentation of any plan under subsection (b), the Secretary  
16 shall submit to Congress a report on the implementation  
17 of the enhanced service program.

18       (k) RESIDUAL AUTHORITY.—Nothing in this section  
19 may be construed to diminish the authority of the Sec-  
20 retary to—

21               (1) consolidate, eliminate, abolish, or redis-  
22 tribute the functions or missions of facilities in the  
23 Department;

24               (2) revise the functions or missions of any such  
25 facility or activity; or

1           (3) create new facilities or activities in the De-  
2       partment.

3   **SEC. 108. COUNSELING AND TREATMENT FOR VETERANS**  
4                   **WHO HAVE EXPERIENCED SEXUAL TRAUMA.**

5       (a) EXTENSION OF PERIOD OF PROGRAM.—Sub-  
6       section (a) of section 1720D is amended—

7           (1) in paragraph (1), by striking “December  
8       31, 2001” and inserting “December 31, 2002”; and

9           (2) in paragraph (3), by striking “December  
10      31, 2001” and inserting “December 31, 2002”.

11      (b) MANDATORY NATURE OF PROGRAM.—(1) Sub-  
12      section (a)(1) of such section is further amended by strik-  
13      ing “may provide counseling to a veteran who the Sec-  
14      retary determines requires such counseling” and inserting  
15      “shall operate a program under which the Secretary pro-  
16      vides counseling and appropriate care and services to vet-  
17      erans who the Secretary determines require such coun-  
18      seling and care and services”.

19      (2) Subsection (a) of such section is further  
20      amended—

21           (A) by striking paragraph (2); and

22           (B) by redesignating paragraph (3) (as amend-  
23      ed by subsection (a)(2)) as paragraph (2).

24      (c) OUTREACH EFFORTS.—Subsection (c) of such  
25      section is amended—

1           (1) by inserting “and treatment” in the first  
2 sentence and in paragraph (2) after “counseling”;

3           (2) by striking “and” at the end of paragraph  
4 (1);

5           (3) by redesignating paragraph (2) as para-  
6 graph (3); and

7           (4) by inserting after paragraph (1) the fol-  
8 lowing new paragraph (2):

9           “(2) shall ensure that information about the  
10 counseling and treatment available to veterans under  
11 this section—

12                   “(A) is revised and updated as appro-  
13 priate;

14                   “(B) is made available and visibly posted  
15 at appropriate facilities of the Department; and

16                   “(C) is made available through appropriate  
17 public information services; and”.

18       (d) REPORT ON IMPLEMENTATION OF OUTREACH  
19 ACTIVITIES.—Not later than six months after the date of  
20 the enactment of this Act, the Secretary of Veterans Af-  
21 fairs shall submit to the Committees on Veterans’ Affairs  
22 of the Senate and House of Representatives a report on  
23 the Secretary’s implementation of paragraph (2) of section  
24 1720D(c) of title 38, United States Code, as added by  
25 subsection (c). Such report shall include examples of the

1 documents and other means of communication developed  
2 for compliance with that paragraph.

3 (e) STUDY OF EXPANDING ELIGIBILITY FOR COUN-  
4 SELING AND TREATMENT.—(1) The Secretary of Veterans  
5 Affairs, in consultation with the Secretary of Defense,  
6 shall conduct a study to determine—

7 (A) the extent to which former members of the  
8 reserve components of the Armed Forces experienced  
9 physical assault of a sexual nature or battery of a  
10 sexual nature while serving on active duty for train-  
11 ing;

12 (B) the extent to which such former members  
13 have sought counseling from the Department of Vet-  
14 erans Affairs relating to those incidents; and

15 (C) the additional resources that, in the judg-  
16 ment of the Secretary, would be required to meet the  
17 projected need of those former members for such  
18 counseling.

19 (2) Not later than 16 months after the date of the  
20 enactment of this Act, the Secretary of Veterans Affairs  
21 shall submit to the Committees on Veterans' Affairs of  
22 the Senate and House of Representatives a report on the  
23 results of the study conducted under paragraph (1).

24 (f) OVERSIGHT OF OUTREACH ACTIVITIES.—Not  
25 later than 14 months after the date of the enactment of

1 this Act, the Secretary of Veterans Affairs and the Sec-  
2 retary of Defense shall submit to the appropriate congres-  
3 sional committees a joint report describing in detail the  
4 collaborative efforts of the Department of Veterans Affairs  
5 and the Department of Defense to ensure that members  
6 of the Armed Forces, upon separation from active mili-  
7 tary, naval, or air service, are provided appropriate and  
8 current information about programs of the Department of  
9 Veterans Affairs to provide counseling and treatment for  
10 sexual trauma that may have been experienced by those  
11 members while in the active military, naval, or air service,  
12 including information about eligibility requirements for,  
13 and procedures for applying for, such counseling and  
14 treatment. The report shall include proposed recommenda-  
15 tions from both the Secretary of Veterans Affairs and the  
16 Secretary of Defense for the improvement of their collabo-  
17 rative efforts to provide such information.

18 (g) REPORT ON IMPLEMENTATION OF SEXUAL  
19 TRAUMA TREATMENT PROGRAM.—Not later than 14  
20 months after the date of the enactment of this Act, the  
21 Secretary of Veterans Affairs shall submit to the Commit-  
22 tees on Veterans' Affairs of the Senate and House of Rep-  
23 resentatives a report on the use made of the authority pro-  
24 vided under section 1720D of title 38, United States Code,  
25 as amended by this section. The report shall include the

1 following with respect to activities under that section since  
2 the enactment of this Act:

3 (1) The number of veterans who have received  
4 counseling under that section.

5 (2) The number of veterans who have been re-  
6 ferred to non-Department mental health facilities  
7 and providers in connection with sexual trauma  
8 counseling and treatment.

9 **TITLE II—PROGRAM**  
10 **ADMINISTRATION**

11 **SEC. 201. MEDICAL CARE COLLECTIONS.**

12 (a) LIMITED AUTHORITY TO SET COPAYMENTS.—

13 (1) Section 1722A is amended—

14 (A) by redesignating subsections (b) and (c) as  
15 subsections (c) and (d), respectively;

16 (B) by inserting after subsection (a) the fol-  
17 lowing new subsection (b):

18 “(b) The Secretary, pursuant to regulations which  
19 the Secretary shall prescribe, may—

20 “(1) increase the copayment amount in effect  
21 under subsection (a);

22 “(2) establish a maximum annual pharma-  
23 ceutical copayment amount under subsection (a) for  
24 veterans who have multiple outpatient prescriptions;  
25 and

1 “(3) require a veteran, other than a veteran de-  
 2 scribed in subsection (a)(3), to pay to the United  
 3 States a reasonable copayment for sensori-neural  
 4 aids, electronic equipment, and any other costly item  
 5 or equipment furnished the veteran for a nonservice-  
 6 connected condition, other than a wheelchair or arti-  
 7 ficial limb.”; and

8 (C) in subsection (c), as redesignated by sub-  
 9 paragraph (A)—

10 (i) by striking “this section” and inserting  
 11 “subsection (a)”; and

12 (ii) by adding at the end the following new  
 13 sentence: “Amounts collected through use of  
 14 the authority under subsection (b) shall be de-  
 15 posited in Department of Veterans Affairs  
 16 Health Services Improvement Fund.”.

17 (2)(A) The heading of such section is amended to  
 18 read as follows:

19 **“§ 1722A. Copayments for medications and certain**  
 20 **costly items and equipment”.**

21 (B) The item relating to such section in the table of  
 22 sections at the beginning of chapter 17 is amended to read  
 23 as follows:

“1722A. Copayments for medications and certain costly items and equipment.”.

24 (b) OUTPATIENT TREATMENT OF CATEGORY C VET-  
 25 ERANS.—(1) Section 1710(g) is amended—

1 (A) in paragraph (1), by striking “the amount  
 2 under paragraph (2) of this subsection” and insert-  
 3 ing “in the case of each outpatient visit the applica-  
 4 ble amount or amounts established by the Secretary  
 5 by regulation”; and

6 (B) in paragraph (2), by striking all after “for  
 7 an amount” and inserting “which the Secretary shall  
 8 establish by regulation.”.

9 **SEC. 202. HEALTH SERVICES IMPROVEMENT FUND.**

10 (a) ESTABLISHMENT OF FUND.—Chapter 17 is  
 11 amended by inserting after section 1729A the following  
 12 new section:

13 **“§ 1729B. Health Services Improvement Fund**

14 “(a) There is established in the Treasury of the  
 15 United States a fund to be known as the ‘Department of  
 16 Veterans Affairs Health Services Improvement Fund’.

17 “(b) Amounts received or collected after the date of  
 18 the enactment of this section under any of the following  
 19 provisions of law shall be deposited in the fund:

20 “(1) Section 1713A of this title.

21 “(2) Section 1722A(b) of this title.

22 “(3) Section 8165(a) of this title.

23 “(4) Section 104(c) of the Veterans’ Millennium  
 24 Health Care Act.

1       “(c) Amounts in the fund are hereby available, with-  
 2 out fiscal year limitation, to the Secretary for the purposes  
 3 stated in subparagraphs (A) and (B) of section  
 4 1729A(c)(1) of this title.”.

5       (b) CLERICAL AMENDMENT.—The table of sections  
 6 at the beginning of such chapter is amended by inserting  
 7 after the item relating to section 1729A the following new  
 8 item:

“1729B. Health Services Improvement Fund.”.

9       **SEC. 203. VETERANS TOBACCO TRUST FUND.**

10       (a) FINDINGS.—Congress finds the following:

11               (1) Smoking related illnesses, including cancer,  
 12 heart disease, and emphysema, are highly prevalent  
 13 among the more than 3,000,000 veterans who use  
 14 the Department of Veterans Affairs health care sys-  
 15 tem annually.

16               (2) The Department of Veterans Affairs esti-  
 17 mates that it spent \$3,600,000,000 in 1997 to treat  
 18 smoking-related illnesses and that over the next five  
 19 years it will spend \$20,000,000,000 on such care.

20               (3) Congress established the Department of  
 21 Veterans Affairs in furtherance of its constitutional  
 22 power to provide for the national defense in order to  
 23 provide benefits and services to veterans of the uni-  
 24 formed services.

1           (4) There is in the Department of Veterans Af-  
2       fairs a health care system which has as its primary  
3       function to provide a complete medical and hospital  
4       service for the medical care and treatment of such  
5       veterans as can be served through available appro-  
6       priations.

7           (5) The Federal Government, including the De-  
8       partment of Veterans Affairs, has lacked the means  
9       to prevent the onset of smoking-related illnesses  
10      among veterans and has had no authority to deny  
11      needed treatment to any veteran on the basis that  
12      an illness is or might be smoking-related.

13          (6) With some 20 percent of its health care  
14      budget absorbed in treating smoking-related ill-  
15      nesses, the Department of Veterans Affairs health  
16      care system has lacked resources to provide needed  
17      nursing home care, home care, community-based  
18      ambulatory care, and other services to tens of thou-  
19      sands of other veterans.

20          (7) The network of academically affiliated med-  
21      ical centers of the Department of Veterans Affairs  
22      provides a unique system within which outstanding  
23      medical research is conducted and which has the po-  
24      tential to expand significantly ongoing research on  
25      tobacco-related illnesses.

1 (b) ESTABLISHMENT OF TRUST FUND.—(1) Chapter  
2 17 is amended by inserting after section 1729B, as added  
3 by section 202(a), the following new section:

4 **“§ 1729C. Veterans Tobacco Trust Fund**

5 “(a) There is established in the Treasury of the  
6 United States a trust fund to be known as the ‘Veterans  
7 Tobacco Trust Fund’, consisting of such amounts as may  
8 be appropriated, credited, or donated to the trust fund.

9 “(b) If the United States pursues recovery (other  
10 than a recovery authorized under this title) from a party  
11 or parties specifically for health care costs incurred or to  
12 be incurred by the United States that are attributable to  
13 tobacco-related illnesses, there shall be credited to the  
14 trust fund from the amount of any such recovery by the  
15 United States, without further appropriation, the amount  
16 that bears the same ratio to the amount recovered as the  
17 amount of the Department’s costs for health care attrib-  
18 utable to tobacco-related illnesses for which recovery is  
19 sought bears to the total amount sought by the United  
20 States.

21 “(c) After September 30, 2004, amounts in the trust  
22 fund shall be available, without fiscal year limitation, to  
23 the Secretary for the following purposes:

24 “(1) Furnishing medical care and services  
25 under this chapter, to be available during any fiscal

1 year for the same purposes and subject to the same  
 2 limitations (other than with respect to the period of  
 3 availability for obligation) as apply to amounts ap-  
 4 propriated from the general fund of the Treasury for  
 5 that fiscal year for medical care.

6 “(2) Conducting medical research, rehabilita-  
 7 tion research, and health systems research, with par-  
 8 ticular emphasis on research relating to prevention  
 9 and treatment of, and rehabilitation from, tobacco  
 10 addiction and diseases associated with tobacco use.”.

11 (2) The table of sections at the beginning of such  
 12 chapter is amended by inserting after the item relating  
 13 to section 1729B, as added by section 202(b), the fol-  
 14 lowing new item:

“1729C. Veterans Tobacco Trust Fund.”.

15 **SEC. 204. AUTHORITY TO ACCEPT FUNDS FOR EDUCATION**  
 16 **AND TRAINING.**

17 (a) ESTABLISHMENT OF NONPROFIT CORPORATIONS  
 18 AT MEDICAL CENTERS.—Section 7361(a) is amended—

19 (1) by inserting “and education” after “re-  
 20 search”; and

21 (2) by adding at the end the following: “Such  
 22 a corporation may be established to facilitate either  
 23 research or education or both research and edu-  
 24 cation.”.

1 (b) PURPOSE OF CORPORATIONS.—Section 7362 is  
2 amended—

3 (1) in the first sentence, by inserting “and edu-  
4 cation and training as described in sections 7302,  
5 7471, 8154, and 1701(6)(B) of this title” after “of  
6 this title”; and

7 (2) in the second sentence—

8 (A) by inserting “or education” after “re-  
9 search”; and

10 (B) by striking “that purpose” and insert-  
11 ing “these purposes”.

12 (c) BOARD OF DIRECTORS.—Section 7363(a) is  
13 amended—

14 (1) in subsection (a)(1), by striking all after  
15 “medical center, and” and inserting “as appropriate,  
16 the assistant chief of staff for research for the med-  
17 ical center and the associate chief of staff for edu-  
18 cation for the medical center, or, in the case of a fa-  
19 cility at which such positions do not exist, those offi-  
20 cials who are responsible for carrying out the re-  
21 sponsibilities of the medical center director, chief of  
22 staff, and, as appropriate, the assistant chief of staff  
23 for research and the assistant chief for education;  
24 and”;

1           (2) in subsection (a)(2), by inserting “or edu-  
2           cation, as appropriate” after “research”; and

3           (3) in subsection (c), by inserting “or edu-  
4           cation” after “research”.

5           (d) APPROVAL OF EXPENDITURES.—Section 7364 is  
6 amended by adding at the end the following new sub-  
7 section:

8           “(c)(1) A corporation established under this sub-  
9 chapter may not spend funds for an education activity un-  
10 less the activity is approved in accordance with procedures  
11 prescribed by the Under Secretary for Health.

12          “(2) The Under Secretary for Health shall prescribe  
13 policies and procedures to guide the expenditure of funds  
14 by corporations under paragraph (1) consistent with the  
15 purpose of such corporations as flexible funding mecha-  
16 nisms.”.

17 **SEC. 205. EXTENSION AND REVISION OF CERTAIN AU-**  
18 **THORITIES.**

19          (a) READJUSTMENT COUNSELING PROGRAM.—Sec-  
20 tion 1712A(a)(1)(B)(ii) is amended by striking “2000”  
21 and inserting “2003”.

22          (b) COMMITTEE ON MENTALLY ILL VETERANS.—  
23 Section 7321(d)(2) is amended by striking “three” and  
24 inserting “five”.

1 (c) COMMITTEE ON POST-TRAUMATIC STRESS DIS-  
 2 ORDER.—Section 110 of Public Law 98–528 (38 U.S.C.  
 3 1712A note) is amended—

4 (1) in subsection (e)(1), by striking “March 1,  
 5 1985” and inserting “March 1, 2000”; and

6 (2) in subsection (e)(2), by striking “February  
 7 1, 1986” and inserting “February 1, 2001”.

8 (d) EXTENSION OF AUTHORITY TO MAKE  
 9 GRANTS.—Section 3(a)(2) of the Homeless Veterans Com-  
 10 prehensive Service Programs Act of 1992 (38 U.S.C. 7721  
 11 note) is amended by striking “September 30, 1999” and  
 12 inserting “September 30, 2002”.

13 (e) AUTHORITY TO MAKE GRANTS FOR HOMELESS  
 14 VETERANS.—Section 3(b)(2) of the Homeless Veterans  
 15 Comprehensive Service Programs Act of 1992 (38 U.S.C.  
 16 7721 note) is amended by striking “and no more than 20  
 17 programs which incorporate the procurement of vans as  
 18 described in paragraph (1)”.

19 **SEC. 206. STATE HOME GRANT PROGRAM.**

20 (a) GENERAL REGULATIONS.—Section 8134 is  
 21 amended—

22 (1) by redesignating subsection (b) as sub-  
 23 section (c);

24 (2) by striking the matter in subsection (a) pre-  
 25 ceding paragraph (2) and inserting the following:

1       “(a)(1) The Secretary shall prescribe regulations for  
2 the purposes of this subchapter.

3       “(2) In those regulations, the Secretary shall pre-  
4 scribe for each State the number of nursing home and  
5 domiciliary beds for which assistance under this sub-  
6 chapter may be furnished. Such regulations shall be based  
7 on projected demand for such care 10 years after the date  
8 of the enactment of the Veterans’ Millennium Health Care  
9 Act by veterans who at such time are 65 years of age or  
10 older and who reside in that State. In determining such  
11 projected demand, the Secretary shall take into account  
12 travel distances for veterans and their families.

13       “(3)(A) In those regulations, the Secretary shall es-  
14 tablish criteria under which the Secretary shall determine,  
15 with respect to an application for assistance under this  
16 subchapter for a project described in subparagraph (B)  
17 which is from a State that has a need for additional beds  
18 as determined under subsections (a)(2) and (d)(1), wheth-  
19 er the need for such beds is most aptly characterized as  
20 great, significant, or limited. Such criteria shall take into  
21 account the availability of beds already operated by the  
22 Secretary and other providers which appropriately serve  
23 the needs which the State proposes to meet with its appli-  
24 cation.

1       “(B) This paragraph applies to a project for the con-  
2       struction or acquisition of a new State home facility, to  
3       a project to increase the number of beds available at a  
4       State home facility, and a project to replace beds at a  
5       State home facility.

6       “(4) The Secretary shall review and, as necessary, re-  
7       vise regulations prescribed under paragraphs (2) and (3)  
8       not less often than every four years.

9       “(b) The Secretary shall prescribe the following by  
10      regulation:”;

11               (3) by redesignating paragraphs (2) and (3) of  
12      subsection (b), as designated by paragraph (2), as  
13      paragraphs (1) and (2);

14               (4) in subsection (c), as redesignated by para-  
15      graph (1), by striking “subsection (a)(3)” and in-  
16      serting “subsection (b)(2)”; and

17               (5) by adding at the end the following new sub-  
18      section:

19       “(d)(1) In prescribing regulations to carry out this  
20      subchapter, the Secretary shall provide that in the case  
21      of a State that seeks assistance under this subchapter for  
22      a project described in subsection (a)(3)(B), the determina-  
23      tion of the unmet need for beds for State homes in that  
24      State shall be reduced by the number of beds in all pre-  
25      vious applications submitted by that State under this sub-

1 chapter, including beds which have not been recognized  
 2 by the Secretary under section 1741 of this title.

3 “(2)(A) Financial assistance under this subchapter  
 4 for a renovation project may only be provided for a project  
 5 for which the total cost of construction is in excess of  
 6 \$400,000 (as adjusted from time to time in such regula-  
 7 tions to reflect changes in costs of construction).

8 “(B) For purposes of this paragraph, a renovation  
 9 project is a project to remodel or alter existing buildings  
 10 for which financial assistance under this subchapter may  
 11 be provided and does not include maintenance and repair  
 12 work which is the responsibility of the State.”.

13 (b) APPLICATIONS WITH RESPECT TO PROJECTS.—  
 14 Section 8135 is amended—

15 (1) in subsection (a)—

16 (A) by striking “set forth—” in the matter  
 17 preceding paragraph (1) and inserting “set  
 18 forth the following:”;

19 (B) by capitalizing the first letter of the  
 20 first word in each of paragraphs (1) through  
 21 (9);

22 (C) by striking the comma at the end of  
 23 each of paragraphs (1) through (7) and insert-  
 24 ing a period; and

1 (D) by striking “, and” at the end of para-  
2 graph (8) and inserting a period;

3 (2) by redesignating subsections (b), (c), (d),  
4 and (e) as subsections (c), (d), (e), and (f), respec-  
5 tively;

6 (3) by inserting after subsection (a) the fol-  
7 lowing new subsection (b):

8 “(b)(1) Any State seeking to receive assistance under  
9 this subchapter for a project that would involve construc-  
10 tion or acquisition of either nursing home or domiciliary  
11 facilities shall include with its application under subsection  
12 (a) the following:

13 “(A) Documentation (i) that the site for the  
14 project is in reasonable proximity to a sufficient con-  
15 centration and population of veterans who are 65  
16 years of age and older, and (ii) that there is a rea-  
17 sonable basis to conclude that the facilities when  
18 complete will be fully occupied.

19 “(B) A financial plan for the first three years  
20 of operation of such facilities.

21 “(C) A five-year capital plan for the State home  
22 program for that State.

23 “(2) Failure to provide adequate documentation  
24 under paragraph (1)(A) or to provide an adequate finan-

1 cial plan under paragraph (1)(B) shall be a basis for dis-  
 2 approving the application.”; and

3 (4) in subsection (c), as redesignated by para-  
 4 graph (2)—

5 (A) in paragraph (1), by striking “for a  
 6 grant under subsection (a) of this section” in  
 7 the matter preceding subparagraph (A) and in-  
 8 serting “under subsection (a) for financial as-  
 9 sistance under this subchapter”;

10 (B) in paragraph (2)—

11 (i) by striking “the construction or ac-  
 12 quisition of” in subparagraph (A); and

13 (ii) by striking subparagraphs (B),  
 14 (C), and (D) and inserting the following:

15 “(B) An application from a State for a project  
 16 at an existing facility to remedy a condition or con-  
 17 ditions that have been cited by an accrediting insti-  
 18 tution, by the Secretary, or by a local licensing or  
 19 approving body of the State as being threatening to  
 20 the lives or safety of the patients in the facility.

21 “(C) An application from a State that has not  
 22 previously applied for award of a grant under this  
 23 subchapter for construction or acquisition of a State  
 24 nursing home.

1           “(D) An application for construction or acqui-  
2           tion of a nursing home or domiciliary from a State  
3           that the Secretary determines, in accordance with  
4           regulations under this subchapter, has a great need  
5           for the beds to be established at such home or facil-  
6           ity.

7           “(E) An application from a State for renova-  
8           tions to a State home facility other than renovations  
9           described in subparagraph (B).

10          “(F) An application for construction or acqui-  
11          tion of a nursing home or domiciliary from a State  
12          that the Secretary determines, in accordance with  
13          regulations under this subchapter, has a significant  
14          need for the beds to be established at such home or  
15          facility.

16          “(G) An application that meets other criteria as  
17          the Secretary determines appropriate and has estab-  
18          lished in regulations.

19          “(H) An application for construction or acqui-  
20          tion of a nursing home or domiciliary from a State  
21          that the Secretary determines, in accordance with  
22          regulations under this subchapter, has a limited  
23          need for the beds to be established at such home or  
24          facility.”; and

1 (C) in paragraph (3), by striking subpara-  
 2 graph (A) and inserting the following:

3 “(A) may not accord any priority to a project  
 4 for the construction or acquisition of a hospital;  
 5 and”.

6 (c) TRANSITION.—The provisions of sections 8134  
 7 and 8135 of title 38, United States Code, as in effect on  
 8 June 1, 1999, shall continue in effect after such date with  
 9 respect to applications described in section 8135(b)(2)(A)  
 10 of such title, as in effect on that date, that are identified  
 11 on the list that (1) is described in section 8135(b)(4) of  
 12 such title, as in effect on that date, and (2) was estab-  
 13 lished by the Secretary of Veterans Affairs on October 29,  
 14 1998.

15 (d) EFFECTIVE DATE FOR INITIAL REGULATIONS.—  
 16 The Secretary of Veterans Affairs shall prescribe the ini-  
 17 tial regulations under subsection (a) of section 8134 of  
 18 title 38, United States Code, as added by subsection (a),  
 19 not later than April 30, 2000.

20 **SEC. 207. EXPANSION OF ENHANCED-USE LEASE AUTHOR-**  
 21 **ITY.**

22 (a) AUTHORITY.—Section 8162(a)(2) is amended—

23 (1) by striking “only if the Secretary” and in-  
 24 serting “only if—

25 “(A) the Secretary”;

1           (2) by redesignating subparagraphs (A), (B),  
2           and (C) as clauses (i), (ii), and (iii), respectively,  
3           and realigning those clauses so as to be four ems  
4           from the left margin;

5           (3) by striking the period at the end of clause  
6           (iii), as so redesignated, and inserting “; or”; and

7           (4) by adding at the end the following:

8           “(B) the Secretary determines that the imple-  
9           mentation of a business plan proposed by the Under  
10          Secretary for Health for applying the consideration  
11          under such a lease to the provision of medical care  
12          and services would result in a demonstrable improve-  
13          ment of services to eligible veterans in the geo-  
14          graphic service-delivery area within which the prop-  
15          erty is located.”.

16          (b) TERM OF ENHANCED-USE LEASE.—Section  
17          8162(b) is amended—

18               (1) in paragraph (2), by striking “may not ex-  
19               ceed—” and all that follows and inserting “may not  
20               exceed 75 years.”; and

21               (2) by striking paragraph (4) and inserting the  
22               following:

23               “(4) The terms of an enhanced-use lease may provide  
24               for the Secretary to—

1           “(A) obtain facilities, space, or services on the  
2       leased property; and

3           “(B) use minor construction funds for capital  
4       contribution payments.”.

5       (c) DESIGNATION OF PROPERTY PROPOSED TO BE  
6       LEASED.—(1) Subsection (b) of section 8163 is  
7       amended—

8           (A) by striking “include—” and inserting “in-  
9       clude the following:”;

10          (B) by capitalizing the first letter of the first  
11       word of each of paragraphs (1), (2), (3), (4), and  
12       (5);

13          (C) by striking the semicolon at the end of  
14       paragraphs (1), (2), and (3) and inserting a period;  
15       and

16          (D) by striking subparagraphs (A), (B), and  
17       (C) of paragraph (4) and inserting the following:

18               “(A) would—

19                       “(i) contribute in a cost-effective man-  
20                       ner to the mission of the Department;

21                       “(ii) not be inconsistent with the mis-  
22                       sion of the Department;

23                       “(iii) not adversely affect the mission  
24                       of the Department; and

25                       “(iv) affect services to veterans; or

1           “(B) would result in a demonstrable im-  
 2           provement of services to eligible veterans in the  
 3           geographic service-delivery area within which  
 4           the property is located.”.

5           (2) Subparagraph (E) of subsection (c)(1) of that  
 6           section is amended by striking clauses (i), (ii), and (iii)  
 7           and inserting the following:

8           “(i) would—

9                   “(I) contribute in a cost-effective  
 10                  manner to the mission of the Department;

11                  “(II) not be inconsistent with the mis-  
 12                  sion of the Department;

13                  “(III) not adversely affect the mission  
 14                  of the Department; and

15                  “(IV) affect services to veterans; or

16           “(ii) would result in a demonstrable im-  
 17           provement of services to eligible veterans in the  
 18           geographic service-delivery area within which  
 19           the property is located.”.

20           (d) USE OF PROCEEDS.—Section 8165(a) is  
 21           amended—

22           (1) by striking paragraph (1) and inserting the  
 23           following:

24           “(a)(1) Funds received by the Department under an  
 25           enhanced-use lease and remaining after any deduction

1 from those funds under subsection (b) shall be deposited  
2 in the Department of Veterans Affairs Health Services  
3 Improvement Fund established under section 1729B of  
4 this title. The Secretary shall make available to the des-  
5 ignated health care region of the Veterans Health Admin-  
6 istration within which the leased property is located not  
7 less than 75 percent of the amount deposited in the fund  
8 attributable to that lease.”; and

9 (2) by adding at the end the following new  
10 paragraph:

11 “(3) For the purposes of paragraph (1), the term  
12 ‘designated health care region of the Veterans Health Ad-  
13 ministration’ means a geographic area designated by the  
14 Secretary for the purposes of the management of, and al-  
15 location of resources for, health care services provided by  
16 the Veterans Health Administration.”.

17 (e) REPEAL OF TERMINATION PROVISION.—(1) Sec-  
18 tion 8169 is repealed.

19 (2) The table of sections at the beginning of chapter  
20 81 is amended by striking the item relating to section  
21 8169.

22 (f) REPEAL OF OBSOLETE PROVISIONS.—Section  
23 8162 is amended—

24 (1) by striking the last sentence of subsection

25 (a)(1); and

1 (2) by striking subsection (c).

2 **SEC. 208. INELIGIBILITY FOR EMPLOYMENT BY VETERANS**

3 **HEALTH ADMINISTRATION OF HEALTH CARE**

4 **PROFESSIONALS WHO HAVE LOST LICENSE**

5 **TO PRACTICE IN ONE JURISDICTION WHILE**

6 **STILL LICENSED IN ANOTHER JURISDICTION.**

7 Section 7402 is amended by adding at the end the  
8 following new subsection:

9 “(f) A person may not be employed in a position  
10 under subsection (b) (other than under paragraph (4) of  
11 that subsection) if—

12 “(1) the person is or has been licensed, reg-  
13 istered, or certified (as applicable to such position)  
14 in more than one State; and

15 “(2) either—

16 “(A) any of those States has terminated  
17 such license, registration, or certification for  
18 cause; or

19 “(B) the person has voluntarily relin-  
20 quished such license, registration, or certifi-  
21 cation in any of those States after being noti-  
22 fied in writing by that State of potential termi-  
23 nation for cause.”.

1       **TITLE III—MISCELLANEOUS**

2       **SEC. 301. REVIEW OF PROPOSED CHANGES TO OPERATION**  
3               **OF MEDICAL FACILITIES.**

4       Section 8110 is amended by adding at the end the  
5 following new subsections:

6       “(d) The Secretary may not in any fiscal year close  
7 more than 50 percent of the beds within a bed section  
8 (of 20 or more beds) of a Department medical center un-  
9 less the Secretary first submits to the Committees on Vet-  
10 erans’ Affairs of the Senate and the House of Representa-  
11 tives a report providing a justification for the closure. No  
12 action to carry out such closure may be taken after the  
13 submission of such report until the end of the 21-day pe-  
14 riod beginning on the date of the submission of the report.

15       “(e) The Secretary shall submit to the Committees  
16 on Veterans’ Affairs of the Senate and the House of Rep-  
17 resentatives, not later than January 20 of each year, a  
18 report documenting by network for the preceding fiscal  
19 year the following:

20               “(1) The number of medical service and sur-  
21 gical service beds, respectively, that were closed dur-  
22 ing that fiscal year and, for each such closure, a de-  
23 scription of the changes in delivery of services that  
24 allowed such closure to occur.

1           “(2) The number of nursing home beds that  
2           were the subject of a mission change during that fis-  
3           cal year and the nature of each such mission change.

4           “(f) For purposes of this section:

5           “(1) The term ‘closure’, with respect to beds in  
6           a medical center, means ceasing to provide staffing  
7           for, and to operate, those beds. Such term includes  
8           converting the provision of such bed care from care  
9           in a Department facility to care under contract ar-  
10          rangements.

11          “(2) The term ‘bed section’, with respect to a  
12          medical center, means psychiatric beds (including  
13          beds for treatment of substance abuse and post-trau-  
14          matic stress disorder), intermediate, neurology, and  
15          rehabilitation medicine beds, extended care (other  
16          than nursing home) beds, and domiciliary beds.

17          “(3) The term ‘justification’, with respect to  
18          closure of beds, means a written report that includes  
19          the following:

20                 “(A) An explanation of the reasons for the  
21                 determination that the closure is appropriate  
22                 and advisable.

23                 “(B) A description of the changes in the  
24                 functions to be carried out and the means by

1           which such care and services would continue to  
2           be provided to eligible veterans.

3           “(C) A description of the anticipated ef-  
4           fects of the closure on veterans and on their ac-  
5           cess to care.”.

6 **SEC. 302. PATIENT SERVICES AT DEPARTMENT FACILITIES.**

7           (a) SCOPE OF SERVICES.—Section 7803 is  
8 amended—

9           (1) in subsection (a)—

10           (A) by striking “(a)” before “The can-  
11           teens”; and

12           (B) by striking “in this subsection;” and  
13           all that follows through “the premises” and in-  
14           serting “in this section”; and

15           (2) by striking subsection (b).

16           (b) TECHNICAL AMENDMENTS.—(1) Paragraphs (1)  
17 and (11) of section 7802 are each amended by striking  
18 “hospitals and homes” and inserting “medical facilities”.

19           (2) Section 7803, as amended by subsection (a), is  
20 amended—

21           (A) by striking “hospitals and homes” each  
22           place it appears and inserting “medical facilities”;  
23           and

24           (B) by striking “hospital or home” and insert-  
25           ing “medical facility”.

1 **SEC. 303. REPORT ON ASSISTED LIVING SERVICES.**

2 Not later than April 1, 2000, the Secretary of Vet-  
3 erans Affairs shall submit to the Committees on Veterans  
4 Affairs of the Senate and House of Representatives a re-  
5 port on the feasibility of establishing a pilot program to  
6 assist veterans in receiving needed assisted living services.  
7 The Secretary shall include in such report recommenda-  
8 tions on—

9 (1) the services and staffing that should be pro-  
10 vided to a veteran receiving assisted living services  
11 under such a pilot program;

12 (2) the appropriate design of such a pilot pro-  
13 gram; and

14 (3) the issues that such a pilot program should  
15 be designed to address.

16 **SEC. 304. CHIROPRACTIC TREATMENT.**

17 (a) ESTABLISHMENT OF PROGRAM.—Within 120  
18 days after the date of the enactment of this Act, the Under  
19 Secretary for Health of the Department of Veterans Af-  
20 fairs, after consultation with chiropractors, shall establish  
21 a policy for the Veterans Health Administration regarding  
22 the role of chiropractic treatment in the care of veterans  
23 under chapter 17 of title 38, United States Code.

24 (b) DEFINITIONS.—For purposes of this section:

25 (1) The term “chiropractic treatment” means  
26 the manual manipulation of the spine performed by

1 a chiropractor for the treatment of such musculo-  
2 skeletal conditions as the Secretary considers appro-  
3 priate.

4 (2) The term “chiropractor” means an indi-  
5 vidual who—

6 (A) is licensed to practice chiropractic in  
7 the State in which the individual performs  
8 chiropractic services; and

9 (B) holds the degree of doctor of chiro-  
10 practic from a chiropractic college accredited by  
11 the Council on Chiropractic Education.

12 **SEC. 305. DESIGNATION OF HOSPITAL BED REPLACEMENT**  
13 **BUILDING AT IOANNIS A. LOUGARIS DEPART-**  
14 **MENT OF VETERANS AFFAIRS MEDICAL CEN-**  
15 **TER, RENO, NEVADA.**

16 The hospital bed replacement building under con-  
17 struction at the Ioannis A. Lougaris Department of Vet-  
18 erans Affairs Medical Center in Reno, Nevada, is hereby  
19 designated as the “Jack Streeter Building”. Any reference  
20 to that building in any law, regulation, map, document,  
21 record, or other paper of the United States shall be consid-  
22 ered to be a reference to the Jack Streeter Building.

1   **TITLE IV—CONSTRUCTION AND**  
2           **FACILITIES MATTERS**

3   **SEC. 401. AUTHORIZATION OF MAJOR MEDICAL FACILITY**  
4           **PROJECTS.**

5           The Secretary of Veterans Affairs may carry out the  
6 following major medical facility projects, with each project  
7 to be carried out in the amount specified for that project:

8           (1) Renovation to provide a domiciliary at Or-  
9 lando, Florida, in a total amount not to exceed  
10 \$2,400,000, to be derived only from funds appro-  
11 priated for Construction, Major Projects, for a fiscal  
12 year before fiscal year 2000 that remain available  
13 for obligation.

14           (2) Surgical addition at the Kansas City, Mis-  
15 souri, Department of Veterans Affairs medical cen-  
16 ter, in an amount not to exceed \$13,000,000.

17   **SEC. 402. AUTHORIZATION OF MAJOR MEDICAL FACILITY**  
18           **LEASES.**

19           The Secretary of Veterans Affairs may enter into  
20 leases for medical facilities as follows:

21           (1) Lease of an outpatient clinic, Lubbock,  
22 Texas, in an amount not to exceed \$1,112,000.

23           (2) Lease of a research building, San Diego,  
24 California, in an amount not to exceed \$1,066,500.

1 **SEC. 403. AUTHORIZATION OF APPROPRIATIONS.**

2 (a) IN GENERAL.—There are authorized to be appro-  
3 priated to the Secretary of Veterans Affairs for fiscal year  
4 2000 and for fiscal year 2001—

5 (1) for the Construction, Major Projects, ac-  
6 count \$13,000,000 for the project authorized in sec-  
7 tion 401(2); and

8 (2) for the Medical Care account, \$2,178,500  
9 for the leases authorized in section 402.

10 (b) LIMITATION.—The project authorized in section  
11 401(2) may only be carried out using—

12 (1) funds appropriated for fiscal year 2000 or  
13 fiscal year 2001 pursuant to the authorization of ap-  
14 propriations in subsection (a);

15 (2) funds appropriated for Construction, Major  
16 Projects, for a fiscal year before fiscal year 2000  
17 that remain available for obligation; and

18 (3) funds appropriated for Construction, Major  
19 Projects, for fiscal year 2000 for a category of activ-  
20 ity not specific to a project.

Passed the House of Representatives September 21,  
1999.

Attest:

*Clerk.*